	PATENT /	APPLICATIO Effect	N FEE DI ive Janua	RD	Application or Docket Number 10/649699							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	MITTY	OR	OTHER	
TOTAL CLAIMS			12					RATE	FEE	1	RATE	FEE
FOR			NUMBER FRLED NO.		NUMB	ER EXTRA		BARIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			12 minus 20= * /		.0			X\$ 9=		OR	X\$ 18≃	
INDEPENDENT CLAIMS			2 minus 3 = 0					X42=		OR	X84=	
M	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140≈		OR	+280=	
* If the difference in column 1 is less than zero, enter "O" in column 2						olumn 2	1	TOTAL		OR	TOTAL	250
CLAIMS AS AMENDED - PART (I 2 28 04 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	• 7.	Minus	* 2	0			X3 9=		OR	X\$18=	
AME	Independent	• 02	Minus	72	<u> </u>	•		X42=		OR	X84=	
	PINST PHESE	NTATION OF MU	JLI PLE DEI	ENDENI	CLAUK		<u> </u>	+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								WUNI, FEE		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		5		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MIL	Minus	*** *ENDENT	CL AHA	-		X42=		OR	X84=	
-							' [+140=		OR	+280=	
							<u>.</u>	TOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE	
			·			•						
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID I	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
1	Total	•	Minus	**		•		X\$ 9=		OR	X\$18=	
	Independent	•	Minus			-		X42=	-	OR	X84=	
لـا	FIRST PRESE	NTATION OF ME	ILTIPLE DEF	MAGNA	CLAIM		!	+140=		OR	+280=	
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20."									∩B 	TOTAL	
	of the Trichest No.	mber Previously Pali ber Previously Pali	Ed For IN THE	B SPACE I	s loos the	n 3. enter "3."	-	DCIT. FEE nd in the ap	propriate box	•	ADDIT. FEE I umm 1.	

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